## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as

indicated unless corrected below or directed of maintenance fee notifications.	nerwise in block i, by (a	a) specifying a new corre	spondence address: and/	at (n) indicating a sepa	BRE FEE ADDRESS FOR
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address)			Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
48356 7590 03/1	6/2009	Hav			
MCNEELY BODENDORF LLP P.O. BOX 34175 WASHINGTON, DC 20043			Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (\$71) 273-2885, on the date indicated below.		
					(Depositor's name)
					(Signature)
				······································	(Dato)
APPLICATION NO. FILING DATE	:	FIRST NAMED INVENTOR	ATT	ORNEY DOCKET NO.	CONFIRMATION NO.
10/800,181 03/12/2004		Kyung-Hee Lee		12000.SMG.0023	8617
TITLE OF INVENTION: APPARATUS AND Y	AETHOD FOR PERFORM	MING MONTGOMERY T	"YPE MODULAR MUI.	PPLICATION	
APPLN: TYPE SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(8) DUE	DATE DUE
nonprovisional NO	\$1510	\$300	\$0	\$1810	06/16/2009
EXAMINER	ART UNIT	CLASS-SUBCLASS	]		
BAYOU, YONAS A	2434	380-030000			
1. Change of correspondence address or indicatic CFR 1.363).  Change of correspondence address (or Ch Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address PTO/SB/47; Rev 03-02 or more recent) attac Number is required.	2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively.  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND RESIDENCE DAT PLEASE NOTE: Unless an assignee is iden recordation as set forth in 37 CFR 3.11. Corr (A) NAME OF ASSIGNEE  Samsung Elect Please check the appropriate assignee category of	tifled below, no assignce pletion of this form is NO	data will appear on the p T a substitute for filing an (B) RESIDENCE: (CITY	alent. If an assignee is assignment.  Yand STATE OR COUN Republic	of Kone	<u>e</u> a
4a. The following fee(s) are submitted:    Issue Fee   Publication Fee (No small entity discount     Advance Order - # of Copies	Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.   The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).				
<ol> <li>Change in Entity Status (from status indicates a Applicant claims SMALL ENTITY states)</li> </ol>	•	☐ b. Applicant is no lon	ger claiming SMALL EN	TITTY status. See 37 CF	R 1.27(g)(2).
NOTE: The Issue Fee and Publication Fee (if requirement as shown by the records of the United States	uired) will not be accepted ties Patent and Trudemark	from anyone other than t	he applicant; a registered	attorney or agent; or the	e assignee or other party in
Authorized Signature Aurhorized Signature Authorized Signature Authorized Signature Aurhorized Signature Authorized Signature Aurhorized Signature Aurhorize	les y. 1-	anle k	Date <u>66</u> Registration No.	/ 15/200 50,70	
This collection of information is required by 37 Can application. Confidentiality is governed by 35 submitting the completed application form to the his form and/or suggestions for reducing this busy 1450, Alexandria, Virginia 22317-1450. DX Alexandria, Virginia 23317-1450. Under the Paperwork Reduction Act of 1995, no					